

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

FEC MAIL CENTER

1. (a) Name of Individual, Organization or Corporation Protect the Blue Collar 40		2015 AUG 19 AM 8:46
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 12743 N 87th Dr		
(c) City, State and ZIP Code Peoria Az 85381		3. FEC Identification Number C00578369
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☒ July 15 Quarterly Report

☐ 24-Hour Report

☐ October 15 Quarterly Report

☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on

5. COVERING PERIOD:

FROM

05 / 28 / 2015

6. TOTAL CONTRIBUTIONS.....

8,051.00

7. TOTAL INDEPENDENT EXPENDITURES

1,566.45

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Frank M Reed Jr

[Signature]

08/07/15

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. § 30109.

SCHEDULE 5-A
ITEMIZED RECEIPTS

PAGE 1 OF 5

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)

Frank M Reed Jr

A. Full Name (Last, First, Middle Initial)

Democracy.com

Mailing Address

231 Front Street

City

Brooklyn

State

NY

Zip Code

11201

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06 ' 03 ' 2015

Amount of Each Receipt this Period

1.00

Name of Employer

Democracy.com

Occupation

CSM

B. Full Name (Last, First, Middle Initial)

Patel, Ashwin

Mailing Address

6630 E Baseline Rd

City

Mesa

State

AZ

Zip Code

85206

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06 ' 03 ' 2015

Amount of Each Receipt this Period

1,000.00

Name of Employer

Southwest Hospitality MGT

Occupation

Lodging Executive

C. Full Name (Last, First, Middle Initial)

Dullbison, Dino

Mailing Address

2480 E Lucky Ln.

City

Flagstaff

State

AZ

Zip Code

86004

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06 ' 03 ' 2015

Amount of Each Receipt this Period

500.00

Name of Employer

Econo Lodge

Occupation

Hotelier

D. Full Name (Last, First, Middle Initial)

Patel, Mitul

Mailing Address

2285 E Butler Ave

City

Flagstaff

State

AZ

Zip Code

86004

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06 ' 03 ' 2015

Amount of Each Receipt this Period

1,000.00

Name of Employer

Jai Shree Hanuman LLC

Occupation

Hotelier

SUBTOTAL of Receipts This Page (optional)

2,501.00

TOTAL This Period (last page carry total to Line 6)

2,501.00

SCHEDULE 5-A
ITEMIZED RECEIPTS

PAGE 2 OF 4

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)

Frank M Reed Jr

A. Full Name (Last, First, Middle Initial)

Prema, Dhiru

Mailing Address

3345 S. Skye Way

City

Flagstaff

State

AZ

Zip Code

86005

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06/04/2015

Amount of Each Receipt this Period

500.00

Name of Employer Shakti Investmests Inc

Occupation

Self Employed

B. Full Name (Last, First, Middle Initial)

Patel, Dipesh

Mailing Address

3037 E Van Buren St

City

Phoenix

State

AZ

Zip Code

85008

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06/05/2015

Amount of Each Receipt this Period

250.00

Name of Employer Ramadada Investment Inc

Occupation

Owner/GM

C. Full Name (Last, First, Middle Initial)

Patel, Dipesh

Mailing Address

3037 E Van Buren St

City

Phoenix

State

AZ

Zip Code

85008

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06/03/2015

Amount of Each Receipt this Period

250.00

Name of Employer Ramadada Investment st

Occupation

Owner/GM

D. Full Name (Last, First, Middle Initial)

Patel, Dipesh

Mailing Address

3037 E Van Buren St

City

Phoenix

State

AZ

Zip Code

85008

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06/05/2015

Amount of Each Receipt this Period

500.00

Name of Employer Lucky Lane Hospitality LLC

Occupation

Owner/GM

SUBTOTAL of Receipts This Page (optional)

2,000.00

TOTAL This Period (last page carry total to Line 6)

SCHEDULE 5-A
ITEMIZED RECEIPTS

PAGE 3 OF 4

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NAME OF FILER (In Full)

Frank M Reed Jr

A. Full Name (Last, First, Middle Initial)

Patel, Dipesh

Mailing Address

3037 E Van Buren St

City

Phoenix

State

AZ

Zip Code

85008

Date of Receipt

06 05 2015

Amount of Each Receipt this Period

500.00

FEC ID number of contributing federal political committee.

C00578369

Name of Employer

Platinum Hospitality Management LLC

Occupation

Owner/GM

B. Full Name (Last, First, Middle Initial)

Patel, Dipesh

Mailing Address

3037 E Van Buren St

City

Phoenix

State

AZ

Zip Code

85008

Date of Receipt

06 05 2015

Amount of Each Receipt this Period

500.00

FEC ID number of contributing federal political committee.

C00578369

Name of Employer

Sai Sai Baba LLC

Occupation

Owner/GM

C. Full Name (Last, First, Middle Initial)

Patel, Chandramauli

Mailing Address

2200 E Butler Ave

City

Flagstaff

State

AZ

Zip Code

86004

Date of Receipt

06 08 2015

Amount of Each Receipt this Period

1000.00

FEC ID number of contributing federal political committee.

C00578369

Name of Employer

Kenzona Investment

Occupation

Hotelier

D. Full Name (Last, First, Middle Initial)

Patel, Karan

Mailing Address

1560 E Route 66

City

Flagstaff

State

AZ

Zip Code

86001

Date of Receipt

06 08 2015

Amount of Each Receipt this Period

250.00

FEC ID number of contributing federal political committee.

C00578369

Name of Employer

PCM LLC

Occupation

Hotelier

SUBTOTAL of Receipts This Page (optional)

2,250.00

TOTAL This Period (last page carry total to Line 6)

SCHEDULE 5-A
ITEMIZED RECEIPTS

PAGE 4 OF 4

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)

Frank M Reed Jr

A. Full Name (Last, First, Middle Initial)

Patel, Kunal

Mailing Address

914 S Milton Rd

City

Flagstaff

State

AZ

Zip Code

86001

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06 08 2015

Amount of Each Receipt this Period

250.00

Name of Employer PDGS Hospitality LLC

Occupation

Hotelier

B. Full Name (Last, First, Middle Initial)

Patel, Dipesh

Mailing Address

PO Box 1961

City

Flagstaff

State

AZ

Zip Code

86002

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06 08 2015

Amount of Each Receipt this Period

1000.00

Name of Employer Williams Hotels

Occupation

Owner/GM

C. Full Name (Last, First, Middle Initial)

Pramod, Keshav

Mailing Address

3601 E Lockett Rd / 2255 N Bristolcone Dr

City

Flagstaff

State

AZ

Zip Code

86004

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06 14 2015

Amount of Each Receipt this Period

500.00

Name of Employer None

Occupation

Retired / Not Employed

D. Full Name (Last, First, Middle Initial)

Daynes, Laurie

Mailing Address

2737 Brewer Drive

City

Sierra Vista

State

AZ

Zip Code

85650

FEC ID number of contributing federal political committee.

C00578369

Date of Receipt

06 14 2015

Amount of Each Receipt this Period

50.00

Name of Employer Daynes Optical

Occupation

Secretary

SUBTOTAL of Receipts This Page (optional)

2,250.00

TOTAL This Period (last page carry total to Line 6)

8,051.00

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Frank M. Reed Jr

Full Name (Last, First, Middle Initial) of Payee

Olivas, Miguel

Mailing Address

City

Tusayan

State

AZ

Zip Code

Date of Public Distribution/Dissemination

05 28 2015

Amount

451.82

Purpose of Expenditure

Met Robin Premn & Ash Patel

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Olivas, Miguel

Mailing Address

City

Tucson

State

AZ

Zip Code

Date of Public Distribution/Dissemination

06 02 2015

Amount

48.30

Purpose of Expenditure

Spoke with Speaker of the House Gowan

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Olivas, Miguel

Mailing Address

City

Tucson

State

AZ

Zip Code

Date of Public Distribution/Dissemination

06 09 2015

Amount

400.00

Purpose of Expenditure

Hire social media tech for website

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

900.12

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....

(carry total from last page forward to Line 7)

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 2 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Frank M Reed Jr

Full Name (Last, First, Middle Initial) of Payee

Olivas, Miguel

Mailing Address

Date of Public Distribution/Dissemination

06/10/2015

Amount

419.13

City

Flagstaff

State

AZ

Zip Code

Purpose of Expenditure

Met Coral Evans / Mike Urton

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Olivas, Lupe

Mailing Address

6251 E Sylvane

Date of Public Distribution/Dissemination

06/15/2015

Amount

150.00

City

Tucson

State

AZ

Zip Code

85711

Purpose of Expenditure

Create Website

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Olivas, Lupe

Mailing Address

6251 E Sylvane

Date of Public Distribution/Dissemination

06/15/2015

Amount

183.41

City

Tucson

State

AZ

Zip Code

85711

Purpose of Expenditure

Create Website

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

587.47

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....

(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Frank M Reed Jr

Full Name (Last, First, Middle Initial) of Payee <u>Reed, Frank</u>			Date of Public Distribution/Dissemination <u>06</u> / <u>23</u> / <u>2015</u>	
Mailing Address <u>12743 N 81th Dr</u>			Amount <u>79.74</u>	
City <u>Peoria</u>	State <u>IL</u>	Zip Code <u>61611</u>		
Purpose of Expenditure <u>Business Cards</u>		Category/Type <div style="border: 1px solid black; width: 50px; height: 15px;"></div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure:			Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; width: 150px; height: 15px;"></div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination	
Mailing Address			Amount	
City	State	Zip Code		
Purpose of Expenditure		Category/Type <div style="border: 1px solid black; width: 50px; height: 15px;"></div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure:			Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; width: 150px; height: 15px;"></div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

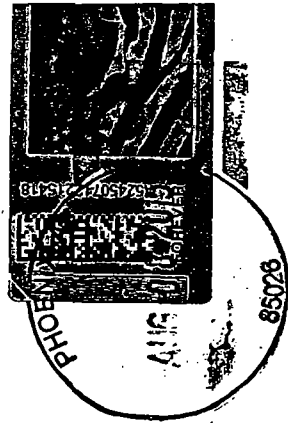
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination	
Mailing Address			Amount	
City	State	Zip Code		
Purpose of Expenditure		Category/Type <div style="border: 1px solid black; width: 50px; height: 15px;"></div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure:			Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; width: 150px; height: 15px;"></div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	79.74
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶ (carry total from last page forward to Line 7)	1,566.45

INFORMATION UNIT FOR THE UNION

Protect the Blue Collar 40
12743 N 81th Dr
Peoria, AZ 85381


Federal Election Commission
ATTN: Report Analysis Division
999 E ST NW
Washington, DC 20463-0001



RECEIVED
FEC MAIL CENTER
2015 AUG 19 AM 8:45

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked <i>08-08-15</i>
<input type="checkbox"/> USPS Registered/Certified	Date of Receipt <i>08-19-15</i>
<input type="checkbox"/> USPS Priority Mail	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER
(3/2015)

08/19/15
DATE PREPARED